

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF TEXAS

FILED
2014 JUN 26 PM
CLERK, U.S. DISTRICT COURT
WESTERN DISTRICT OF TEXAS
BY [Signature] DEPUTY

Lindsey Kent Springer

Plaintiff/Petitioner - Appellant,

v.

Rachel Chapa

Defendant/Respondent - Appellee.

Case No. 14-CV-115 PRM
5th Cir. # 14-50561

Motion for Leave to Proceed on
Appeal Without Prepayment of
Costs or Fees (non-PLRA)

I, Lindsey Kent Springer, the petitioner/appellant in the
captioned case move this court for leave to proceed in forma pauperis.

In support of this motion, I state that because of my poverty, I am unable to pay the
costs of said proceedings or give security therefor, I submit the following financial
declaration.

FINANCIAL DECLARATION

Affidavit to Accompany Motion for Permission to Appeal in Forma Pauperis

I swear or affirm under penalty of perjury that because of my poverty I am unable to pay the docket fees of my appeal or to post a bond for them. I believe I am entitled to a different result than that reached in the district court.

I further swear or affirm under penalty of perjury that the responses which I have made to the questions and instructions below relating to my ability to pay the fees for my appeal are true.

Instructions. Please complete all questions in this application and then sign it on the last page. If the answer to any question is "0" or "none," or the question is "not applicable", so indicate by writing "0", "none", or "not applicable (N/A)". If additional space is needed to answer any question or to explain your answer to any question, please use and attach a separate sheet of paper identified with your name, the docket number of your case and the number of the question.

My issues on appeal are: (1) Does Court have § 2241 jurisdiction where judgment is signed coram non judice; (2) Does § 292(b) require the office to be filled be vacant; (3) Is authority to assign under § 292(b) delegatable; (4) Is Dec. 30, 2008 document an "order"; (5) Does § 292(b) authorize establishing of Art. III, § 1 district judge offices; (6) Did Congress authorize Chief Judge to rewrite 28 U.S.C. §§ 133(a) and 134(a); (7) Does § 292(b), and as applied, violate Article II, § 2, Cl. 2; (8) Does § 292(b), and as applied, violate Art. III, § 1; (9) Does assignment of Stephen P. Friot to 2255 proceeding render 2255 inadequate and ineffective; (10) Should district court have issued Rule to Show Cause; (11) Is Judgment dated April 28, 2010 void; (12) Should Appellant be released immediately?

1. Are you or your spouse currently employed? Yes _____ No X
2. If you or your spouse are currently employed, state the name and address of your employer, the length of your employment with that employer, and your monthly gross pay. Gross pay is pay before any taxes or other deductions are taken. If you have more than one employer, please provide the information requested below about the other employer(s) on a separate sheet of paper and attach it to this application.

Yourself:

Your Spouse:

Name and Address of Employer

Name and Address of Employer

BOP-ESL LaTuna
P.O. Box 6000
Anthony, New Mexico 88021

N/A

Length of Employment

Length of Employment

— 6
 Years Months

— —
 Years Months

Monthly Gross Pay \$ 5⁶⁰Monthly Gross Pay \$ —

3. If you are currently unemployed, state the date of your last employment and your monthly gross pay during your last month of employment. Gross pay is pay before any taxes or other deductions are taken.

Date of last employment (Month/Year) for yourself —; spouse —

Monthly gross pay during last month of employment \$ —

4. State whether you or your spouse have received money from any of the following sources during the past twelve months, and, if so, the average monthly amount from that source. Adjust any money that was received weekly, bi-weekly, quarterly, semi-annually, or annually to show the monthly rate.

Did you receive money from any of the following sources during the past 12 months?

Average monthly amount during past 12 months for you and your spouse if applicable.

Amount expected next month

		You	Spouse	You	Spouse
Self-employment	Y/N <u>N</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Income from real property (such as rental income)	Y/N <u>N</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Interest and dividends	Y/N <u>N</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Gifts	Y/N <u>Y</u>	\$ <u>135</u>	\$ <u>—</u>	\$ <u>None</u>	\$ <u>—</u>
Alimony	Y/N <u>N</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Child Support	Y/N <u>N</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>

Retirement income from sources
such as social security, private
pensions, annuities, or insurance
policies

Y/N N \$ _____ \$ _____ \$ _____ \$ _____

Disability payments such as social
security, other state or federal
government, or insurance
payments

Y/N N \$ _____ \$ _____ \$ _____ \$ _____

Unemployment payments

Y/N N \$ _____ \$ _____ \$ _____ \$ _____

Public assistance payments such as
welfare payments

Y/N N \$ _____ \$ _____ \$ _____ \$ _____

Other sources of money

(specify: _____) Y/N N \$ _____ \$ _____ \$ _____ \$ _____

I hope I will receive the same gift next month but
have no way of certainty \$140.00
TOTAL \$ _____ \$ None \$ _____

5. State the amount of cash you and your spouse have: \$ 16.00

State below any money you or your spouse have in savings, checking, or other accounts in a
bank or other financial institution.

Bank or Other Financial Institution:	Type of Account such as savings, checking, or CD:	Amount you have:	Amount your spouse has:
<u>None</u>		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____

6. State below the assets owned by you and your spouse. **Do not list ordinary household furnishings and clothing.**

Home	Address: <u>None</u>	Value: \$ _____
		Amount owed on mortgages and liens: \$ _____
Other real estate	Address: <u>None</u>	Value: \$ _____
		Amount owed on mortgages and liens: \$ _____
Motor vehicle	Model/Year: <u>None</u>	Value: \$ _____
		Amount owed: \$ _____
Motor vehicle	Model/Year: <u>None</u>	Value: \$ _____
		Amount owed: \$ _____
Other	Description: <u>None</u>	Value: \$ _____
		Amount owed: \$ _____

7. State below any person, business, organization, or governmental unit that owes you or your spouse money and the amount that is owed.

Name of Person, Business, or Organization that Owes You or Your Spouse Money	Amount Owed You:	Amount Owed Your Spouse:
<u>None</u>	\$ _____	\$ _____
_____	\$ _____	\$ _____

8. State the individuals who rely on you and your spouse for support. Indicate their relationship to you, their age, and whether they live with you.

Name	Relationship	Age	Does this person live with you?	
<u>None</u>			Yes <u> </u>	No <u> </u>
<u> </u>	<u> </u>	<u> </u>	Yes <u> </u>	No <u> </u>
<u> </u>	<u> </u>	<u> </u>	Yes <u> </u>	No <u> </u>
<u> </u>	<u> </u>	<u> </u>	Yes <u> </u>	No <u> </u>

9. Complete this question by estimating the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, bi-weekly, quarterly, semi-annually, or annually to show the monthly rate.

	You	Spouse
Rent or home mortgage payment (include lot rented for mobile home)	\$ <u>n/a</u>	\$ <u> </u>
Are real estate taxes included? Yes <u> </u> No <u> </u>		
Is property insurance included? Yes <u> </u> No <u> </u>		
Utilities: Electricity and heating fuel	\$ <u>n/a</u>	\$ <u> </u>
Water and sewer	\$ <u>n/a</u>	\$ <u> </u>
Telephone	\$ <u>n/a</u>	\$ <u> </u>
Other <u> </u>	\$ <u>n/a</u>	\$ <u> </u>
Home maintenance (Repairs and upkeep)	\$ <u>n/a</u>	\$ <u> </u>
Food	\$ <u>35.00</u>	\$ <u> </u>
Clothing	\$ <u>n/a</u>	\$ <u> </u>
Laundry and dry cleaning	\$ <u>n/a</u>	\$ <u> </u>
Medical and dental expenses	\$ <u>n/a</u>	\$ <u> </u>
Transportation (not including car payments)	\$ <u>n/a</u>	\$ <u> </u>

Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>n/a</u>	\$ _____
Charitable contributions	\$ <u>n/a</u>	\$ _____
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's	\$ <u>n/a</u>	\$ _____
Life	\$ <u>n/a</u>	\$ _____
Health	\$ <u>n/a</u>	\$ _____
Auto	\$ <u>n/a</u>	\$ _____
Other _____	\$ <u>n/a</u>	\$ _____
Taxes (not deducted from wages or included in home mortgage payments) (specify) _____		\$ _____
Installment payments		
Auto:	\$ <u>n/a</u>	\$ _____
Credit Card: (name) _____	\$ <u>n/a</u>	\$ _____
Department Store: (name) _____	\$ <u>n/a</u>	\$ _____
Other _____	\$ <u>n/a</u>	\$ _____
Other _____	\$ <u>n/a</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>n/a</u>	\$ _____
Payments for support of additional dependents not living at your home	\$ <u>n/a</u>	\$ _____
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ <u>n/a</u>	\$ _____
Other <u>copies, Type Ribbon, Correct Ribbon, Stamps, ect.</u>	\$ <u>47.50</u>	\$ _____
Fines / FRP	\$ <u>25.00</u>	
Fees IRP In 14-cv-071 (N.D OK) appx	\$ <u>29.00</u>	
TOTAL MONTHLY EXPENSES	\$ <u>137.00</u>	\$ _____

10. Do you expect any major changes to your monthly income or expenses during the next four months? Yes _____ No X

If yes, describe.

11. Have you paid an attorney any money for services in connection with this case, including the completion of this form? Yes _____ No X

If yes, how much? \$ _____

If yes, provide the name, address, and telephone number of the attorney:

Have you promised to pay or do you anticipate paying an attorney any money for services in connection with this case, including the completion of this form? Yes _____ No X

If yes, how much? \$ _____

If yes, provide the name, address, and telephone number of the attorney:

12. Have you paid anyone other than an attorney (such as a paralegal, typing service, or another person) any money for services in connection with this case, including the completion of this form?

Yes _____ No X

If yes, how much? \$ _____

If yes, provide the name, address, and telephone number of the person or service:

13. Have you promised to pay or do you anticipate paying anyone other than an attorney (such as a paralegal, typing service, or another person) any money for services in connection with this case, including the completion of this form? Yes _____ No X

If yes, how much? \$ _____

If yes, provide the name, address, and telephone number of the person or service:

14. How much can you pay each month toward the docket fee for your appeal.

\$ none

15. Please provide any other information that helps to explain why you are unable to pay the docket fees for your appeal. I am in Prison and have no extra \$\$.
No way to pay.

16. State the address of your legal residence:

Reg # 02580-063, Federal Satellite Low-LaTune
P.O. Box 6000, Anthony, New Mexico 88021

Your daytime phone number:

() none

Your age: 48

Years of schooling: High School Diploma

Your social security number: XXX-XX-3758

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA THAT THE FOREGOING IS TRUE AND CORRECT. 28 U.S.C. § 1746, 18 U.S.C. § 1621.

Date: 6/21/14

Signature: Lindsey K. Spruyn

CERTIFICATE OF SERVICE

I hereby certify that on 6/23/14 I sent a copy of
6/23/14 [date]

the foregoing Motion for Leave to Proceed on Appeal without Prepayment of
Costs of Fees, to:

Clerk of Court, at U.S. Courthouse, 525
Magoffin Avenue Rm 105, El Paso, Texas 79901

_____, the last known
address/email address, by U.S. mail.

[state method of service]

6/23/14
Date
6/23/14

Lindsey K. Springer
Signature

Declaration of mailing

I declare under the penalty of perjury, pursuant
to 28 U.S.C § 1746(i), under the laws of the United
States of America, that on June 23, 2014, I deposited
the above motion in the U.S. mailbox located inside
ESL hATuna to the address above,

Lindsey K. Springer
declarant

Lindsey Kent Springer
Reg # 02580-063
Federal Satellite Law-kaTana
P.O. Box 6000
Anthony, New Mexico 88021

"Legal Mail"

⇔02580-063⇔
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